

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AS</i>		<i>03/18/00</i>
O.I.P.E. CLASSIFIER		<i>21 3/22/00</i>	
FORMALITY REVIEW		<i>67803</i>	<i>8-2-00</i>
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓	..... Rejected	N	..... Non-elected
=	..... Allowed	I	..... Interference
-	(Through numeral).... Canceled	A	..... Appeal
-/-	..... Restricted	O	..... Objected

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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